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APPLICANTS

Lijun Sun, Harvard, MA;
 Keizo Koya, Chestnut Hill, MA;
 Zhi-Qiang Xia, Acton, MA;
 Teresa Przewlaka, Tewksbury, MA;
 Shijie Zhang, Nashua, NH;
 Mitsunori Ono, Lexington, MA;

**** CONTINUING DATA *******

This appln claims benefit of 60/410,679 09/13/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY MA | SHEETS DRAWING 0 | TOTAL CLAIMS 30 | INDEPENDENT CLAIMS 4 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i> | | | | |

ADDRESS

021005

TITLE

Synthesis of indolizines

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| FILING FEE RECEIVED 1166 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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